

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	20-0297
Date:	10-23-20
Amount Paid:	\$175 \$900
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted. FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input checked="" type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input checked="" type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name:		Loren Hammond		Mailing Address:		City/State/Zip:		Telephone:	
Address of Property:		22470 Rocky Road		City/State/Zip:		Cornucopia WI 54827		715-742-3365	
Contractor:				Contractor Phone:		Plumber:		Cell Phone:	
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Kyle L. Anderson		Agent Phone:		651-895-7350		Plumber Phone:	
Agent Mailing Address (include City/State/Zip):		P.O. Box 204 Cornucopia WI 54827		Written Authorization Attached		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID#		7532		Recorded Document: (Showing Ownership)	
NW 1/4, NE 1/4		Gov't Lot		Lot(s)		1		Subdivision:	
CSM		1381		Vol & Page		V8 P222		CSM Doc #	
1381		Lot(s) #		Block #					
Section 22		Township 50		N, Range 06		W		Town of: BELL	
Lot Size		~ 600' x 400'		Acreage		~ 5.5			

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain?	If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage	If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland					

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$300,000 \$250,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: IBD Conventional	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 68	Width: 28	Height: 18

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	( 68' X 28' )	1904
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( 68' X 28' )	(1904)
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
<input type="checkbox"/> Commercial Use	<input checked="" type="checkbox"/>	with a Deck	( 12 X 12 )	144
		with (2nd) Deck	( X )	
	<input checked="" type="checkbox"/>	with Attached Garage	( 28 X 28 )	784
	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date)	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Addition/Alteration (explain)	( X )	
	<input type="checkbox"/>	Accessory Building (explain)	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain)	( X )	
	<input checked="" type="checkbox"/>	Special Use: (explain) Forestry to Residential (Class 1 submit to Town & Bell Sep 20)	( X )	
	<input type="checkbox"/>	Conditional Use: (explain)	( X )	
	<input type="checkbox"/>	Other: (explain)	( X )	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Loren Hammond  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 9/6/2020

Authorized Agent: Kyle L. Anderson  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date 6 Sep 20

Address to send permit P.O. Box 204 Cornucopia WI 54827

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

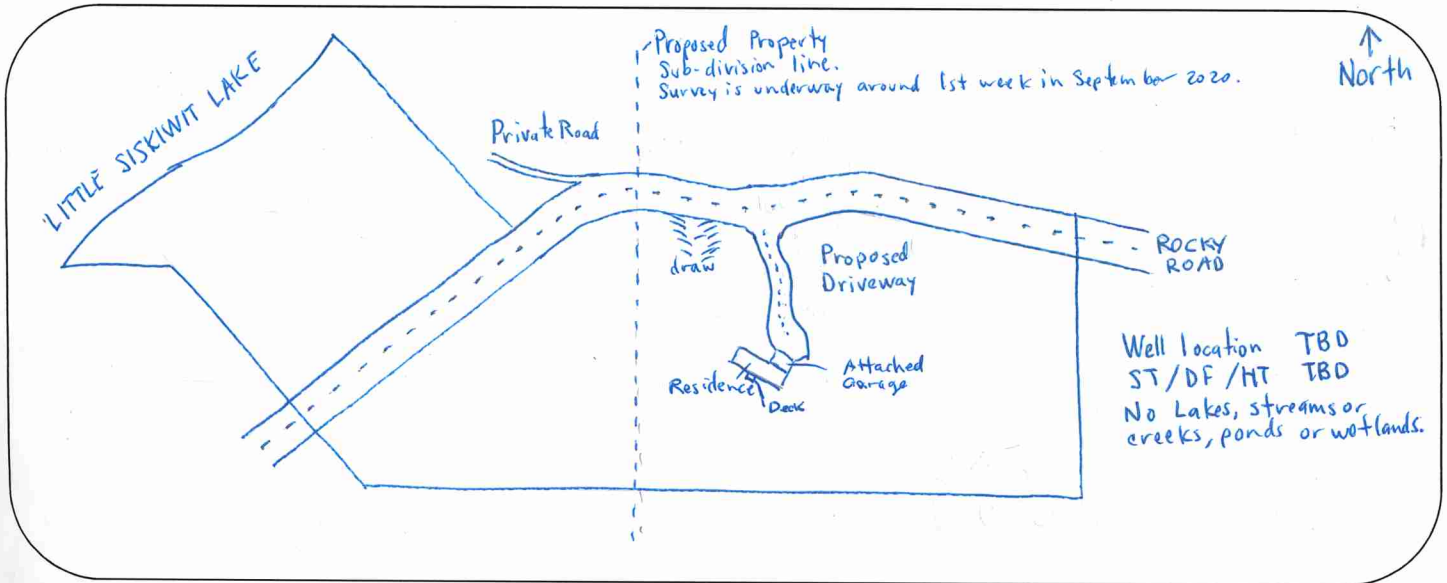
Original Application MUST be submitted



Below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of: ☒ **Proposed Construction**
- (2) Show / Indicate: ☒ **North (N) on Plot Plan**
- (3) Show Location of (\*): (\*) **Driveway and (\*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: (\*) **Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)**
- (6) Show any (\*): (\*) **Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond**
- (7) Show any (\*): (\*) **Wetlands; or (\*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	249	Feet	Setback from the Lake (ordinary high-water mark)	880
Setback from the Established Right-of-Way	216	Feet	Setback from the River, Stream, Creek	21000
New CSM lot ↓			Setback from the Bank or Bluff	> 300
Setback from the North Lot Line	180	216	Feet	NA
Setback from the South Lot Line	150	~120	Feet	
Setback from the West Lot Line	80	~600	Feet	Setback from Wetland
Setback from the East Lot Line	420	~400	Feet	> 300
			20% Slope Area on the property	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Setback to Septic Tank or Holding Tank	TBD	Feet	Elevation of Floodplain	NA
Setback to Drain Field	TBD	Feet		Feet
Setback to Privy (Portable, Composting)	TBD	Feet	Setback to Well	TBD
				Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: **ALL** Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 20-0297		Permit Date: 10-23-20		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Case #:	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: site recently surveyed and surveyor marked 75' setback line as well. Project site staked. Appears code compliant.			Zoning District ( F1 )	
Date of Inspection: 9-30-20			Lakes Classification ( )	
Inspected by: Todd Norwood			Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)				
Must obtain a uniform dwelling code (UDC) permit from the locally contracted UDC inspection agency prior to start of construction. Must meet and maintain setbacks				
Signature of Inspector: Todd Norwood			Date of Approval: 10-22-20	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Parcel Tax ID 7532 is in the process of being subdivided by CSM. Proposed house will be on new parcel which the recent survey stakes/flags reflect at time of inspection.



# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

City, Village, State or Federal  
Also Be Required

USE - **X**  
SANITARY - **20-178S**  
SIGN -  
SPECIAL - **Class A**  
CONDITIONAL -  
BOA -

No. **20-0297** Issued To: **Loren & Vernice Hammand / Kyle Anderson, Agent**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **22** Township **50** N. Range **6** W. Town of **Bell**

Gov't Lot                      Lot **1**                      Block                      Subdivision                      CSM# **1381**

For: **Residential Use: [ 1- Story; Residence (68' x 28') = 1,904 sq. ft.; Deck (12' x 12') = 144 sq. ft.;  
Attached Garage (28' x 28') = 784 sq. ft. ] Total Overall = 2,832 sq. ft.**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction if required. Must meet and maintain setbacks.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

**Todd Norwood**

Authorized Issuing Official

**October 23, 2020**

Date

**Town, City, Village, State or Federal**  
**Permits May Also Be Required**

LAND USE - X  
SANITARY - none  
SIGN -  
SPECIAL - TBA  
CONDITIONAL -  
BOA -

**BAYFIELD COUNTY**  
**PERMIT**  
**WEATHERIZE AND POST THIS PERMIT**  
**ON THE PREMISES DURING CONSTRUCTION**

No: 10062001-2020		Tax ID: 7726		Issued To: TOWN OF BELL	
Location: SW NW 438		Section 26		Township 51 N. Range 06 W.	
Govt Lot 0	Lot	Block	Subdivision:	CSM#	
For: Residential / Other / 400L x 25W x 5H					

**Condition(s):** Grading permit for Town of Bell property only. Driveways on private parcels require additional permitting. Must Follow WDNR wetland permit conditions/standards. Disturbance shall be kept to the minimum area required to complete project. Revegetate disturbed areas following construction. Use BMPs to minimize erosion and runoff.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

**Todd Norwood**  
Authorized Issuing Official

**Fri Oct 23 2020**  
Date

**Town, City, Village, State or Federal  
Permits May Also Be Required**

LAND USE - X  
SANITARY - 00-0650  
SIGN -  
SPECIAL - NA  
CONDITIONAL -  
BOA -

# **BAYFIELD COUNTY PERMIT**

**WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION**

**No: 09092001-2020**

**Tax ID: 7541**

**Issued To: THOMAS B THIEL**

**Location: LOT 3 CSM #880 V.6 P.45  
(LOCATED IN NE NW) IN V.1052 P.795**

**Section 22**

**Township 50 N.**

**Range 06 W.**

**BELL**

**Govt Lot 0**

**Lot**

**Block**

**Subdivision:**

**CSM# 880**

**For: Residential / Detached Garage / 40L x 24W x 15H, Garage: 12L x 14W x12H**

**Condition(s): Structure not for human habitation/sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.**

**NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.**

**Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.**

**This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.**

**Todd Norwood**

**Authorized Issuing Official**

**Fri Oct 23 2020**

**Date**